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## FEC FORM 9 24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations	
(a) Name AMERICAN LEADERSHIP PROJECT	
(b) Address (number and street)	oreviously reported  2. FEC Identification Number
(c) City, State and ZIP Code SAN FRANCISCO	CA 94114 C C30000871
(d) Name of Employer or Principal Place of Business	(e) Occupation
3. Is This Statement or Amended	4. Covering Period  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
5. (a) Date of Public Distribution(s) M M V D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
6. Is the Filer a Qualified Nonprofit Corporation un	der 11 CFR 114.10(c)? Yes No X
7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account?	
8. Custodian of Records  (a) Name  Nancy L Warren  (b) Address (number and street) 2261 Market Street PMB 319	
(c) City, State and ZIP Code	
San Francisco (d) Name of Employer or Principal Place of Business	CA 94114  (e) Occupation
Warren & Associates LLC	Accountant
9. Total Donations This Statement	1027150.00
10.Total Disbursements/Obligations This Statement 856500.00	
Under penalty of perjury, I certify that this statement is true, correct and complete. In addition, if the electioneering communications reported herein were made by a corporation, I cerify that the corporation is a qualified nonprofit corporation under the Commission's regulations.	
TYPE OR PRINT NAME OF PERSON COMPLETING FORM	Nancy L Warren
SIGNATURE	DATE04/30/2008

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalities of 2 U.S.C. 437g.

FE3AN038.PDF FEC FORM 9 (REV. 02/2003)